

Type a plus sign (+) inside this box →

0010 PTO

Rev. 6/96

U.S. Department of Commerce  
Patent and Trademark OfficeAttorney Docket  
Number

H 3174 PCT/US

First Named  
Inventor

HAERER, Juergen

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

**DECLARATION FOR  
UTILITY OR DESIGN  
PATENT APPLICATION**

Declaration Submitted with Initial Filing      OR     Declaration Submitted after Initial Filing

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**SHAPED BODIES OF DISHWASHING DETERGENT WITH CHLORINE BLEACHING AGENTS**

the specification of which

(Title of the Invention)

is attached hereto

OR

was filed on (MM/DD/YYYY) 12/21/1998 as United States Application Number or PCT International

Application Number PCT/EP98/08372 and was amended on (MM/DD/YYYY)   (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
197 58 178.1	Germany	12/30/1997	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
		<input type="checkbox"/>

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

**DECLARATION**

Page 2

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application OIP Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
MAY 08 2000	PCT/EP98/08372	12/21/1998	

**ATTACHMENT** U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

<input type="checkbox"/> Firm Name _____	<input type="checkbox"/> Customer Number or label _____		
OR			
<input checked="" type="checkbox"/> List Attorney(s) and/or agent(s) name and registration number below:			
Name	Registration Number	Name	Registration Number
Ernest G. Szoke Wayne C. Jaeschke John E. Drach	22,135 21,062 32,891	Glenn E. J. Murphy Stephen D. Harper	33,539 33,243

<input type="checkbox"/> Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.		
Please direct all correspondence to: <input type="checkbox"/> Customer Number or label _____	<input type="checkbox"/> OR <input checked="" type="checkbox"/> Fill in correspondence address below	
Name Glenn E. J. Murphy		
Address Henkel Corporation - Patent Department		
Address 2500 Renaissance Boulevard, Suite 200		
City Gulph Mills	State PA	ZIP 19406
Country USA	Telephone 610-278-4926	Fax 610-278-6548

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned			
Given Name Juergen	Middle Initial	Family Name HAERER	Suffix e.g. Jr.		
Inventor's Signature <i>Juergen Haerer</i>			Date December 10, 1999		
Residence: Duesseldorf	State	Country	Germany DEX	Citizenship	Germany
Post Office Address Leinenweberweg 20					
Post Office Address					
City 40593 Duesseldorf	State	Zip	Country	Germany	Applicant Authority
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto					

BEST AVAILABLE COPY

MAY 08 2000

## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental SheetName of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name	<u>Thomas Otto</u>	Middle Initial		Family Name	<u>GASSENMEIER</u>	Suffix e.g. Jr.
Inventor's Signature	<u>Thomas Otto Gassenmeier</u>			Date	December 10, 1995	
Residence: City	<u>Duesseldorf</u>	State		Country	Germany	Citizenship
Post Office Address	Am Strausenkreuz 13					
Post Office Address						
City	<u>40229 Duesseldorf</u>	State		Zip		Country
						Germany
						Applicant Authority

Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name	<u>Christian</u>	Middle Initial		Family Name	<u>NITSCH</u>	Suffix e.g. Jr.
Inventor's Signature	<u>Chris Nitsch</u>			Date	December 10, 1995	
Residence: City	<u>Duesseldorf</u>	State		Country	Germany	Citizenship
Post Office Address	Otto-Hahn-Strasse 185					
Post Office Address						
City	<u>40591 Duesseldorf</u>	State		Zip		Country
						Germany
						Applicant Authority

Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name	<u>Hans-Josef</u>	Middle Initial		Family Name	<u>BEAUJEAN</u>	Suffix e.g. Jr.
Inventor's Signature	<u>Hans-Josef Beaujean</u>			Date	December 10, 1995	
Residence: City	<u>Dormagen</u>	State		Country	Germany	Citizenship
Post Office Address	Carl-Friedrich-Schinkel-Strasse 43					
Post Office Address						
City	<u>41539 Dormagen</u>	State		Zip		Country
						Germany
						Applicant Authority

Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name	<u>Bernd</u>	Middle Initial		Family Name	<u>RICHTER</u>	Suffix e.g. Jr.
Inventor's Signature	<u>Bernd Richter</u>			Date	December 10, 1995	
Residence: City	<u>Leichlingen</u>	State		Country	Germany	Citizenship
Post Office Address	In den Weiden 61					
Post Office Address						
City	<u>42799 Leichlingen</u>	State		Zip		Country
						Germany
						Applicant Authority

 Additional inventors are being named on supplemental sheet(s) attached hereto

BEST AVAILABLE COPY

MAY 08 2000

## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental SheetName of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name	Thomas	Middle Initial		Family Name	MOELLER	Suffix e.g. Jr.
------------	--------	----------------	--	-------------	---------	-----------------

Inventor's Signature	<i>Thomas Miller</i>				Date	December 10, 1999
----------------------	----------------------	--	--	--	------	-------------------

Residence: City	Duesseldorf	State		Country	Germany	Citizenship	Germany
-----------------	-------------	-------	--	---------	---------	-------------	---------

Post Office Address	Goeppinger Strasse 4 DÜX						
---------------------	--------------------------	--	--	--	--	--	--

Post Office Address							
---------------------	--	--	--	--	--	--	--

City	40593 Duesseldorf	State		Zip		Country	Germany	Applicant Authority
------	-------------------	-------	--	-----	--	---------	---------	---------------------

Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name		Middle Initial		Family Name				Suffix e.g. Jr.
------------	--	----------------	--	-------------	--	--	--	-----------------

Inventor's Signature					Date		
----------------------	--	--	--	--	------	--	--

Residence: City		State		Country		Citizenship	
-----------------	--	-------	--	---------	--	-------------	--

Post Office Address							
---------------------	--	--	--	--	--	--	--

Post Office Address							
---------------------	--	--	--	--	--	--	--

City		State		Zip		Country		Applicant Authority
------	--	-------	--	-----	--	---------	--	---------------------

Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name		Middle Initial		Family Name				Suffix e.g. Jr.
------------	--	----------------	--	-------------	--	--	--	-----------------

Inventor's Signature					Date		
----------------------	--	--	--	--	------	--	--

Residence: City		State		Country		Citizenship	
-----------------	--	-------	--	---------	--	-------------	--

Post Office Address							
---------------------	--	--	--	--	--	--	--

Post Office Address							
---------------------	--	--	--	--	--	--	--

City		State		Zip		Country		Applicant Authority
------	--	-------	--	-----	--	---------	--	---------------------

Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name		Middle Initial		Family Name				Suffix e.g. Jr.
------------	--	----------------	--	-------------	--	--	--	-----------------

Inventor's Signature					Date		
----------------------	--	--	--	--	------	--	--

Residence: City		State		Country		Citizenship	
-----------------	--	-------	--	---------	--	-------------	--

Post Office Address							
---------------------	--	--	--	--	--	--	--

Post Office Address							
---------------------	--	--	--	--	--	--	--

City		State		Zip		Country		Applicant Authority
------	--	-------	--	-----	--	---------	--	---------------------

 Additional inventors are being named on supplemental sheet(s) attached hereto

BEST AVAILABLE COPY